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**FAX TRANSMISSION****DATE:** May 6, 2005**PTO IDENTIFIER:** Application Number 09/537,118-Conf. #7521  
Patent Number**Inventor:** Harry A. Dugger, III**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (571) 273-8300**FROM:** DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP  
James W. Brady, Jr.**PHONE:** (202) 775-4786**Attorney Dkt. #:** N9810.0007/P007**PAGES (Including Cover Sheet):** 9**CONTENTS:** Preliminary Amendment (6 pages)  
Amendment Transmittal (1 page)  
Certificate of Transmission (1 page)

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PTO/SB/97 (09-04)

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Application No. (if known): 09/537,118

Attorney Docket No.: N9810.0007/P007

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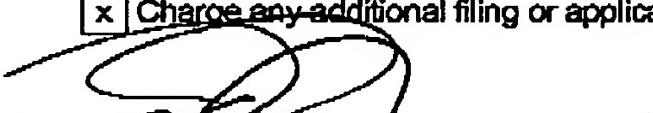
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Preliminary Amendment (6 pages)  
Amendment Transmittal (1 page)

<b>AMENDMENT TRANSMITTAL LETTER</b>				Docket No. N9810.0007/P007
Application No. 09/537,118-Conf. #7521	Filing Date March 29, 2000	Examiner M. Haghigatian	Art Unit 1616	
Applicant(s): Harry A. Dugger, III				
Invention: BUCCAL, POLAR AND NON-POLAR SPRAY OR CAPSULE				
<b>TO THE COMMISSIONER FOR PATENTS</b>				
Transmitted herewith is an amendment in the above-identified application.				
The fee has been calculated and is transmitted as shown below.				
<b>CLAIMS AS AMENDED</b>				
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate
Total Claims	25	- 25 =		x
Independent Claims	3	- 3 =		x
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				
Other fee (please specify):				
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>				0.00
<input type="checkbox"/> Large Entity <input checked="" type="checkbox"/> Small Entity				
<input checked="" type="checkbox"/> No additional fee is required for this amendment.				
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.				
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.				
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.				
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-1073</u> as described below.				
<input checked="" type="checkbox"/> Credit any overpayment.				
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.				
Dated: <u>May 6, 2005</u>				
 James W. Brady, Jr. Attorney Reg. No.: 32,115				
<b>DICKSTEIN SHAPIRO MORIN &amp; OSHINSKY LLP</b> 2101 L Street NW Washington, DC 20037-1526 (202) 775-4788				
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Dated: <u>5/6/05</u> Signature:  (James W. Brady, Jr.)				

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Dated: 5/6/05

Signature:

(James W. Brady, Jr.)

Docket No.: N9810.0007/P007  
(PATENT)

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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In re Patent Application of:  
Harry A. Dugger, III

Application No.: 09/537,118

Confirmation No.: 7521

Filed: March 29, 2000

Art Unit: 1616

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For: BUCCAL POLAR AND NON-POLAR  
SPRAY OR CAPSULE

Examiner: M. Haghigian

PRELIMINARY AMENDMENT

MS Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

## INTRODUCTORY COMMENTS

Prior to examination on the merits, please amend the above-identified U.S. patent application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 6 of this paper.

DSMDDB.1918938.1